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AUG 30 2019	
CLERK U S DISTRICT COURT DISTRICT OF ARIZONA	
BY _____	DEPUTY _____

2E 1.29
Jordan Venable T548371

Name and Prisoner/Booking Number

4th Ave

Place of Confinement

3250 W. Lower Buckeye Road

Mailing Address

Phoenix, Arizona 85009

City, State, Zip Code

(Failure to notify the Court of your change of address may result in dismissal of this action.)

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF ARIZONA**

Jordan Venable
(Full Name of Plaintiff)

Plaintiff,

v.

(1) City of Phoenix
(Full Name of Defendant)

(2) Paramedics Phoenix

(3)

(4)

Defendant(s).

☐ Check if there are additional Defendants and attach page 1-A listing them.

CASE NO. **CV-19-05074-PHX-JJT--DMF**

(To be supplied by the Clerk)

**CIVIL RIGHTS COMPLAINT
BY A PRISONER**

- ☐ Original Complaint
☐ First Amended Complaint
☐ Second Amended Complaint

A. JURISDICTION

1. This Court has jurisdiction over this action pursuant to:

- ☒ 28 U.S.C. § 1343(a); 42 U.S.C. § 1983
☐ 28 U.S.C. § 1331; *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971).
☐ Other: _____

2. Institution/city where violation occurred: Phoenix Az

B. DEFENDANTS

1. Name of first Defendant: City of Phoenix. The first Defendant is employed as: Paramedic at Phoenix AZ.
(Position and Title) (Institution)
2. Name of second Defendant: Phoenix Paramedics. The second Defendant is employed as: Paramedic at Phoenix AZ.
(Position and Title) (Institution)
3. Name of third Defendant: _____. The third Defendant is employed as: _____ at _____.
(Position and Title) (Institution)
4. Name of fourth Defendant: _____. The fourth Defendant is employed as: _____ at _____.
(Position and Title) (Institution)

If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.

C. PREVIOUS LAWSUITS

1. Have you filed any other lawsuits while you were a prisoner? ☒ Yes ☐ No
2. If yes, how many lawsuits have you filed? 4. Describe the previous lawsuits:
- a. First prior lawsuit:
1. Parties: Fire Police v. Jordan Venable
 2. Court and case number: 18-12345 EDK
 3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) dismissed
- b. Second prior lawsuit:
1. Parties: _____ v. _____
 2. Court and case number: _____
 3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) _____
- c. Third prior lawsuit:
1. Parties: _____ v. _____
 2. Court and case number: _____
 3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) _____

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

D. CAUSE OF ACTION**COUNT I**

1. State the constitutional or other federal civil right that was violated: Amendment V.

2. **Count I.** Identify the issue involved. Check **only one**. State additional issues in separate counts.

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Basic necessities | <input type="checkbox"/> Mail | <input type="checkbox"/> Access to the court | <input checked="" type="checkbox"/> Medical care |
| <input type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Property | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Retaliation |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input checked="" type="checkbox"/> Other: <u>killed me</u> | |

3. **Supporting Facts.** State as briefly as possible the FACTS supporting Count I. Describe exactly what **each Defendant** did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

The 5th Amendment says I should not be deprived of life, liberty or property. On or around May 2017 the Phoenix paramedic injected 400mgs of Harse Tranquillizer into my heart and I died. They brought me back to life at the hospital and I was in a coma for 4 days.

4. **Injury.** State how you were injured by the actions or inactions of the Defendant(s).

I died, mentally and physically.

5. **Administrative Remedies:**

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☐ Yes ☒ No
- Did you submit a request for administrative relief on Count I? ☐ Yes ☒ No
- Did you appeal your request for relief on Count I to the highest level? ☐ Yes ☒ No
- If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. nope

E. REQUEST FOR RELIEF

State the relief you are seeking:

20,000,000.00

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

7-20-19
DATE

JV
SIGNATURE OF PLAINTIFF

(Name and title of paralegal, legal assistant, or
other person who helped prepare this complaint)

(Signature of attorney, if any)

(Attorney's address & telephone number)

ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If you need more space, you may attach no more than fifteen additional pages. But the form must be completely filled in to the extent applicable. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages.

MARICOPA COUNTY SHERIFF'S OFFICE

INMATE LEGAL SERVICES

CERTIFICATION

I hereby certify that on this date 8/28/2019

In accordance with the instruction received from the inmate and the rules of this Court, I mailed the original and one (1) copy to the Clerk of the United States District Court, District of Arizona.

I further certify that copies of the original have been forwarded to:

___ Hon _____ United States District Court, District of Arizona.

___ Hon _____ United States District Court, District of Arizona.

___ Attorney General, State of Arizona, _____


___ Judge _____ Superior Court, Maricopa County, State of Arizona.

___ County Attorney, Maricopa County, State of Arizona _____

___ Public Defender, Maricopa County, State of Arizona _____

___ Attorney _____

___ Other _____


Legal Support Specialist Signature


S/N

INMATE LEGAL SERVICES
Maricopa County Sheriff's Office
3250 W. Lower Buckeye Rd.
Phoenix, AZ 85009